



Our Docket No.: 042390.P6115

RESPONSE UNDER 37 C.F.R. § 1.116  
-- EXPEDITED PROCEDURE --  
EXAMINING GROUP 2100

#22/F  
pay  
11/25/03  
(NE.)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Dover et al. ) Examiner: Suryawanshi, Suresh  
Application No.: 09/477,034 ) Art Group: 2185  
Filed: December 31, 1999 )  
For: Non-Volatile Memory Based )  
Monotonic Counter )

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NOV 20 2003

Technology Center 2100

RESPONSE AFTER FINAL

Mail Stop: AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Final Office Action mailed on October 30, 2003, which was made final, applicants submit this Amendment After Final Action for consideration.

FIRST CLASS CERTIFICATE OF MAILING

I hereby certify that I am causing the above-referenced correspondence to be deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and that this paper or fee has been addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

November 12, 2003

Date of Deposit

Leah Schwenke

Name of Person Mailing Correspondence

Leah Schwenke

Signature

11/12/03

Date

Docket No.: 042390.P6115  
Application No.: 09/477,034



AF  
2700

Attorney's Docket No.: 042390.P6115

Patent

In re the Application of: Dover et al.  
(inventor(s))

**AMENDMENT UNDER  
37 C.F.R. § 1.116  
EXPEDITED PROCEDURE**

Application No.: 09/477,034

**EXAMINING GROUP 2185**

Filed: December 31, 1999

For: Non-Volatile Memory Based Monotonic Counter

(title)

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Mail Stop AF  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is an **Amendment After Final Action** for the above-referenced application.

Applicant claims small entity status. See 37 CFR 1.27.

No additional fee is required.

A Notice of Appeal is enclosed.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)		SMALL ENTITY	OTHER THAN A SMALL ENTITY
Total Claims	Claims Remaining After Amd.	Minus	Highest No. Previously Paid For	Present Extra	Rate	Additional Fee
Indep. Claims	29	Minus	30	0	X9	\$
	<b>First Presentation of Multiple Dependent Claim(s)</b>					
	+145				X43	\$
					Total Add. Fee	\$ 0.00

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

on November 12, 2003.

Date of Deposit

Leah Schwenke

Name of Person Mailing Correspondence

Leah Schwenke

Signature

11/12/03

Date

A check in the amount of \$ \_\_\_\_\_ is attached for presentation of additional claim(s).  
 Applicant(s) hereby Petition(s) for an Extension of Time of \_\_\_\_\_ month(s) pursuant to  
37 C.F.R. § 1.136(a).

A check for \$ \_\_\_\_\_ is attached for processing fees under 37 C.F.R. § 1.17.  
Please charge my Deposit Account No. 02-2666 the amount of \$ \_\_\_\_\_.

**A duplicate copy of this sheet is enclosed.**

The Under Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-2666  
**(a duplicate copy of this sheet is enclosed):**

X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of extra claims.

X Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Date: November 12, 2003

\_\_\_\_\_  
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